## GRAMA REQUEST FOR RECORDS

To Heber City:	
I hereb	by request access to the following records (must be described with reasonably specificity): .
I believ	we that these records are maintained by the Heber City Police Department.
0	I would like to inspect the records.
0	I would like to receive a copy of the records. I understand that I will be responsible for costs associated with locating and copying these records. I authorize costs of up to
0	I would like to receive a copy of the records and request a waiver of costs because:
If	Release of the records primarily benefits the public rather than me.  I am the authorized representative of the subject of the record.  My legal rights are directly affected by the record and I am impecunious.  (Please attach information supporting your request for a waiver of fees.)  the request records are not public, I am entitled to have access to them because:
	<ul> <li>I am the subject of the record</li> <li>I am the person who provided the information.</li> <li>I am authorized to have access by the subject of the record or by the person who submitted the information. (Please attach documentation required by U.C.A. 63-2-202.)</li> <li>Other. <ul> <li>Explain</li> </ul> </li> </ul>
	o I am requesting an expedited response. (Please attach information that shows your status as a member of the media and a statement that the records are required for a story for broadcast or publication; or please attach other information that demonstrates that you are entitled to expedited response under U.C.A. 63-2-204 (3).)
My name is:	
My address is:	
City, State, Zip (	Code:
I can be reached	at the following telephone number(s) during business hours:
Signature	Date
Approved by the Attorney):	Wasatch County Attorney (if involving a case prosecuted by the Wasatch County
Signatura	Date